



PROVIDER BULLETIN

PB 02-07

THIS ISSUE

General Vocational Rehabilitation and Claims Information

TO:

Hospitals
Occupational Therapists
Occupational Therapy Clinics
Pain Clinics
Physical Therapists
Physical Therapy Clinics
Vocational Providers
Work Evaluators

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Table of Contents

Page

Purpose.....	1
Plan development services.....	1
Responsibilities of service providers and firms in regard to changes in status	2
Referral Resolution.....	2
Timely notification of changes.....	3
Service provision and billing issues.....	3
Referrals to providers in 'conditional' status.....	4
Work evaluation qualifications.....	4

Purpose

This bulletin establishes the Department of Labor and Industries' new procedure code to be used for certain services provided during plan development. The bulletin also establishes policy on service provider and firm responsibilities when there is a change in status, referrals to vocational providers in 'conditional' status and work evaluation qualifications. This bulletin pertains to State Fund, Self-Insured and Crime Victims claims.

This policy is effective immediately upon publication of this bulletin.

Plan Development Services

The department has established a new procedure code to be used for certain services provided during plan development. Examples of these services are CDL physicals, background checks, driving abstracts and fingerprinting. These services are unique and can assist in determining if a specific worker's vocational plan goal is appropriate. The new code, **0388R**, will be payable to medical and miscellaneous, non-physician providers. It cannot be billed by vocational providers. The code requires prior authorization by the claim manager and is limited to one unit per day, per claim. If you arrange for the above services, or have a like service that is a special circumstance, please contact the unit Vocational Services Consultant to discuss and coordinate prior authorization from the claim manager. The charges must be submitted on a miscellaneous bill form. It is helpful for the provider to include the referral ID and referring provider number on the bill.

This new procedure code, 0388R, cannot be used to bill for services that are part of a retraining plan, such as registrations fees or supplies that might be purchased prior to a plan.

Responsibilities of Service Providers and Firms in regard to Changes in Status

For additional information regarding the information presented in this article, please contact Patricia Hamrick at (360) 902-6753.

A portion of this information was originally published in Provider Update 01-02, under the heading “Resolution of Existing Referrals When a Vocational Provider Leaves a Firm”. This article is meant to clarify and reinforce the information on responsibilities of parties, and to add important responsibility information regarding possible scenarios.

The Department must be notified immediately by both the Firm and the Service Provider (VRC or intern) when there is a change in status. Changes in status include:

- VRC or intern ends their association with a firm.
- VRC assigned to a referral is no longer available to provide services on the referral(s).
- Firm closes.

Notification to the Department involves two aspects:

- 1) Resolution of the open referral(s), and
- 2) Submission of the proper Vocational Provider Change Form(s) to Private Sector Rehabilitation Services (L&I, PO Box 44326, Olympia WA 98504-4326).

Referral Resolution

A vocational referral initially made to a firm, and subsequently assigned to a VRC must close if the assigned VRC is no longer available to provide services on the referral to which they are assigned by that firm. Referrals made directly to the VRC may be transferred by the CM to the VRC’s new firm, *only if the VRC has already established a relationship with a new firm within the same service location*, via the Vocational Provider Account Application process. This process generally takes less than 10 working days from the time the department receives the application.

Vocational providers **must** notify the department if the vocational provider assigned to a referral is no longer available to provide services on that referral. Following are guidelines for department notification:

Scenarios:

- A. For referrals made to the firm and assigned to a VRC:
 - It is the responsibility of the assigned VRC to close the referral on Voc Link Connect with the outcome, “VRC no longer available”. This outcome must be entered immediately upon the VRC’s change in status.
 - It is the responsibility of the vocational manager of the firm to notify the department’s claim manager(s) of the change in status for that referral. The

department must be notified by telephone and/or FAX within three working days of the change in status. Notification by the vocational manager is not necessary if the VRC assigned to the referrals successfully closes the referral as noted above.

The VRC assigned to the referral(s) **may not** contact the claim manager(s) for the purpose of informing them of a change in employment. This would be considered marketing, which is prohibited by department policy. The resolution (i.e., re-referral) of the referral is at the sole discretion of the claim manager.

B. For referrals made directly to the VRC:

- The VRC is responsible for notifying the claim manager of his/her new status, and should be prepared to inform the claim manager of the payee provider number of the new firm, as well as the VRC's new service provider number associated with that firm.
- The claim manager, at his/her sole discretion, may transfer the referral(s) to the VRC at the new firm, provided that the VRC is available to work in the same service location in which the original referral was made.

Timely Notification of Changes

The department requires that vocational providers notify the department in a timely manner regarding changes in status, such as the disassociation of a VRC or intern (service providers) with a firm. This requirement applies to both service providers and firms.

- Service providers are to use the Individual Vocational Provider Account Change Form, and/or the Vocational Provider Account Application to notify the department of a change in their firm relationship status.
- Firms are to use the Firm Vocational Provider Account Change form to notify the department of the disassociation of a service provider.
- These forms may be found at the department's vocational services web site: <http://www.lni.wa.gov/hsa/voc/default.htm>

A firm or service provider that fails to notify the department of changes in status may be in violation of Washington Administrative Code (WAC) and/or department policy. This may result in the department issuing findings and subsequent corrective action(s) as described in WAC 296-19A-270 and WAC 296-19A-260.

Service Provision and Billing Issues

There are important issues related to service provision and billing, when a VRC leaves a firm, or is otherwise no longer available to provide services on a referral.

Example A: Referral was made to a firm, and subsequently assigned to a VRC.

The VRC ends his/her association with the firm, and/or is no longer available to provide

services on a specific referral. No further services should be provided, and no billing for dates of service past that point should be submitted in conjunction with that referral.

Example B: Referral was made directly to a VRC.

The VRC decides to end his/her relationship with their firm, and/or is no longer available to provide services on that referral. No further services should be provided, and no billing for dates of service past that point should be submitted, in conjunction with that referral. Continued service provision and billing for services on that referral can resume only after the claim manager has transferred the referral to the VRC at their new firm.

Additional Information

- When a referral is closed due to the “VRC no longer available” outcome, a closing report is not required.
- When a direct referral is transferred to a VRC at his/her new firm, all vocational billing associated with that referral is carried forward, and will accrue toward the fee cap associated with that referral. It is the responsibility of the VRC assigned to the referral to track the costs (i.e., billings paid) associated with that referral.
- The responsibilities described above apply to any circumstance in which the VRC assigned to the referral is no longer able to provide services on that referral, even if that VRC were not to leave the original firm. An example would be a VRC who is assigned other work duties with their firm, and is no longer responsible for providing services on his/her assigned referrals.

Referrals to Providers in ‘Conditional’ Status

Conditional providers may only receive referrals in very limited circumstances. The department must document the basis and justification for assigning a referral to a conditional provider, either firm or individual vocational counselor.

Only a Claims Manager can assign a referral to a ‘conditional’ vocational provider, either a firm or an individual Vocational Rehabilitation Counselor (VRC). A firm cannot assign a case to a VRC in conditional status.

Work Evaluation Qualifications

A work (vocational) evaluation is a counseling tool used during plan development to identify an industrially injured or ill workers’ vocational aptitudes, skills and interests. It may include, but is not limited to:

- (a) Psychometric testing;
- (b) Work samples;
- (c) Academic achievement testing;
- (d) Situational assessment;
- (e) Specific and general aptitude and skill testing.

Work evaluations must be pre-authorized during Ability to Work Assessment (AWA). In this situation, the department may authorize work evaluations only in limited

circumstances. The work evaluations will be considered when an industrially injured or ill worker's ability to benefit from vocational services is questionable and a recommendation of eligibility is under consideration.

When a vocational rehabilitation provider obtains a work evaluation, the provider must ensure that the test administration, interpretation and reporting of results are performed in a manner consistent with assessment industry standards.